

OFFICE USE ONLY

Central Wisconsin Electric Cooperative Application for Employment

Central Wisconsin Electric Cooperative (CWEC) is an equal opportunity employer.
No information provided here will be used in an unlawful manner.

Instructions:

1. Complete in your own handwriting using black ink.
 2. Answer all questions. Your application will not be considered if incomplete.
 3. Read and sign Page 4.
 4. Mail to: Central Wisconsin Electric Cooperative
Attn: Human Resources
P.O. Box 100
Rosholt, WI 54473
- Fax to: (715) 677-4333

Position Applied for:
Journeyman Lineman

GENERAL INFORMATION

Last Name		First Name		Middle Name	
Mailing Address			City	State	Zip Code
Home Phone Number		Cell Phone Number (Optional)		Work Phone Number (Optional)	

- Yes No Are you under the age of 18?
- Yes No Do you have a valid driver's license? (A valid driver's license is a job-related requirement of some positions at this Cooperative.)
- Yes No Are you related by blood or marriage to any of the following persons: an employee of CWEC or a member of the CWEC Board of directors?
- If the answer is "yes," state the name(s), relationship(s), and position(s) held by the person(s) to whom you are related.
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- Yes No Are you legally eligible for employment in the United States? You will be required as a part of the application process to provide any employment eligibility verification mandated by the federal government.
- Yes No Have you ever been employed by Central Wisconsin Electric Cooperative? If yes, provide dates of employment.
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- Yes No Were you referred by a current employee for this position? If yes, provide the employee's name.

EMPLOYMENT HISTORY

Provide your employment information below. Begin with your present or most recent employment. Use the **Other Information** section (page 3) to complete your employment history if necessary.

Employer Name and Address:	Job Title:	
	Describe the work you did:	
Phone Number:		
Type of Business:		
Starting Salary:	From: (month/year)	To: (month/year)
Ending Salary:	Reason for Leaving:	
Name of Supervisor:		
Supervisor's Phone Number:		
Employer Name and Address:	Job Title:	
	Describe the work you did:	
Phone Number:		
Type of Business:		
Starting Salary:	From: (month/year)	To: (month/year)
Ending Salary:	Reason for Leaving:	
Name of Supervisor:		
Supervisor's Phone Number:		
Employer Name and Address:	Job Title:	
	Describe the work you did:	
Phone Number:		
Type of Business:		
Starting Salary:	From: (month/year)	To: (month/year)
Ending Salary:	Reason for Leaving:	
Name of Supervisor:		
Supervisor's Phone Number:		
May we contact the employers listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, indicate which employer(s) we should not contact:		

EDUCATION AND TRAINING

Indicate all schools that you have attended.

	High School	Vocational/Technical	College/University	Graduate School
School Name and Address				
Did you graduate?	Yes No	Yes No	Yes No	Yes No
Diploma/Degree and Year Graduated				
Major Course(s) of Study				
Other Post High School Courses Completed				

SPECIALIZED TRAINING OR SKILLS: List current typing speed, personal computer training, computer literacy, welding certification, special licenses (e.g., CDL), etc., that you possess that pertain to the position for which you are applying.

SERVICE IN THE ARMED FORCES

Branch of Armed Forces:

General Duties/Training:

OTHER INFORMATION

APPLICANT AUTHORIZATION (Read carefully and initial each paragraph before submitting.)

_____ I certify that the facts contained in this application and/or resume for employment at Central Wisconsin Electric Cooperative are true and complete to the best of my knowledge. I understand that any misrepresentations, falsifications, and/or deliberate omissions identified now or in the future may result in my immediate dismissal.

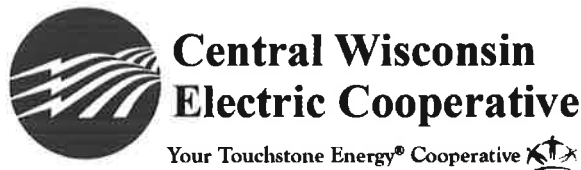
_____ I authorize investigation of all statements herein. I also authorize by my signature below or a copy thereof, the organizations and individuals referred to herein to furnish information to the Cooperative. I may not assert in any forum that the Cooperative is liable to me should it, in processing this employment application, rely on information provided from these sources, even if the information provided is inaccurate or erroneous.

_____ I understand that as a part of being considered for employment by Central Wisconsin Electric Cooperative, I may be required to undergo a physical examination which may include urine testing for drugs. (Certain positions also require testing for alcohol.)

_____ Additionally, I understand that nothing contained in this employment application or in the granting of an interview or in any policies, procedures or handbooks that I might receive, is intended to create an employment contract between Central Wisconsin Electric Cooperative and myself. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Cooperative.

Signed: _____

Date: _____



**Central Wisconsin Electric Cooperative
PO Box 100
Rosholt WI 54473
www.cwecoop.com**